UTILITY
PATENT APPLICATION
TRANSMITTAL
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Attorney Docket No.	00684.002938.1		
First Named Inventor or Application Identifier		ÞΤC	တ္ 🛚
Mika Yamamoto		S)	00
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APPLICATION ELEMENTS See MPEP chapter 600 concerning utility patent application contents.			ADDF	RESS TO:	Commissi P.O. Box	Patent Application oner for Patents 1450 a, VA 22313-1450	10/	
Fee Transmitta (Submit an original)	nittal Form riginal, and a duplicate for fee processing)			7. CD-ROM or CD-R in duplicate, large table or Computer Program (Appendix)				
2. Applicant clain See 37 CFR 1	aims small entity status. R 1.27.			Nucleotide and/or Amino Acid Sequence Submission (if applicable, all necessary)			sion	
3. X Specification	Toṭal Pa	ges 21		a. Computer Readable Form (CRF)				
4. X Drawing(s) (35	5 USC 113) Total Sh	eets 6		b. Specification Sequence Listing on:i. CD-ROM or CD-R (2 copies); or			·	
5. X Oath or Declar	ration Total Pa	ges 2			paper	(2 000,00), 01	:	
a. New	My executed (original or c	юру)	-	с \$	Statements verifyin	g identity of above	copies	
				ACCOM	IPANYING APPLIC	ATION PARTS		
	y from a prior application continuation/divisional with		9.	Assignment	Papers (cover sheet	& document(s))		
, i.	DELETION OF INV		10.		3(b) Statement e is an assignee)	Power of	Attorney .	
inventor(s) named in the prior application, see 37 CFR 1.63(d)(2) and 1.33(b).		see 11.	English Tra	anslation Documen	t (if applicable)			
6. X Application Data Sheet. See 37 CFR 1.76		12. X		Disclosure (IDS)/PTO-1449	Copies of Citations			
Express Mail mailing label number EV 194362560 US Date of Deposit 20, 7004 I hereby certify that this paper is being deposited with the United States Postal				13. X Preliminary Amendment				
Service "Express Mail Pos on the date indicated abov	Post Office to Addressee: service under 37 C.F.R. § 1.10 bove and is addressed to the Commissioner of Patents			Return Receipt Postcard (MPEP 503) (Should be specifically itemized)				
1.	Box 1450, Alexandria, VA 22313-1450 い、FENNESSY		15.	Certified Copy of Priority Document(s) (if foreign priority is claimed)				
	or printed name of person mailing paper or fee)		16. X	S. X Other: Claim To Priority				
Xive MI Taurase to								
Gigns	ature of person mailing page	r or foo)						
			unnly the requisi	te information:				
17. If a CONTINUING APPLICATION, check appropriate box and supply the requisite information: X Continuation Divisional Continuation-in-part (CIP) of prior application No. 09/449,968, filed November 26, 1999 Prior application information: Examiner D. Tran Group/Art Unit: 2624								
For CONTINUATION OR DIVISIONAL APPS only. The entire disclosure of the prior application, from which an oath or declaration is supplied under Box 5b, is considered a part of the disclosure of the accompanying continuation or divisional application and is hereby incorporated by reference. The incorporation can only be relied upon when a portion has been inadvertently omitted from the submitted application parts.								
18. CORRESPONDENCE ADDRESS								
X Customer Number or Bar Code Label (Insert Customer No. or Attach bar code label here) or Correspondence address below								
NAME .							·	
Address								
City		State			Zip Code	<u> </u>		
City Country		Telephone			Fax	 		
Country		relephone			1 . 42			

CLAIMS	(1) FOR	(2) NUMBER FILED (3) NUMBER EXTRA		(4) RATE	(5) CALCULATIONS	
	TOTAL CLAIMS (37 CFR 1.16(c))	7 -20 =	0	X \$ 18.00 =	\$	0.00
	INDEPENDENT CLAIMS (37 CFR 1.16(b))	5 -3 =	•	X \$ 86.00 =	\$ 176	
	MULTIPLE DEPENDENT CLAIMS (if applicable) (37 CFR 1.16(d)) \$			\$290.00 =	\$	0.00
				BASIC FEE (37 CFR 1.16(a))	\$	176.00
			Total of	above Calculations =	\$	946.00
	Reduction by	50% for filing by small en	tity (Note 37 CFR 1.9, 1	1.27, 1.28).		
				TOTAL =	g.	946.00
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SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT REQUIRED				
NAME	Michael K. O'Neill, Reg. No. 32,622			
SIGNATURE	Telichael Kriefell			
DATE	January 29, 2004			

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